STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)			Stefanie G	. Lamb		
II. Name of lobb	yist's partnersh	ip, firm or cor	poration, if ar	ny:		
	Busin	ess & Industr	y Associatio	n of NH		
	(Name of partners	hip, firm or corp	oration)			
	122 N. Main S		Concord		H	03301
Business Address:	(Street)		(Town/City)	(Sta	nte)	(Zip Code)
	- 5388	(603)_		2 e-mail	slamb@biaof	nh.com
(Telepho	ne)		(Fax)			
				ts for each client, Oo any one client).	PR you may file a	separate report for
☐ All reportable	transactions occ	urring in the m	onths prior to t	he reporting date rel	ative to the follow	wing client:
Bus	iness & Indus					
<u>OR</u>	(Full Name	of Client as it ap	pears on the Lol	bbyist Registration For	m)	
		he lobbyist (inc	luding the lobb	oyist's family), or the	e lobbying firm li	sted below which are
IV. Date of Repo	rt April 26, activity from date		3/31/17	July 26, 201 activity from 4/1/17		
Reports Cover.		oj regisiralion i 25, 2017	7 3/3 1/1 /	January 31,		
		7/1/17 to 9/30/1	7	activity from 10/1/1		
	ked, complete ju:			transactions mad e Secretary of State		
VI. Check if addi	itional reports a	re attached:				
	-		es, you must fi	le Addendum A– F	ees and Expenses	,
☐ If you have pa Expense Reimbur	aid an honorariu sement	n or reimburse	d expenses, you	u must file Addendı	um B-Report of	Honorariums or
☐ If you, your fi	irm, or your fam	ily has made po	litical contribu	tions, you must file	Addendum C- F	Political Contributions
Sworn Statement I have read RSA I and complete to the	5, RSA 15-B, R	SA 14-C and R	SA 664 and he	reby swear or affirm 10-25-		ng information is true
(Signature of lob)					(Date)	RECEIVED
Stefanie G. L. (Print Name of lo			_			_
(1 Intervalle of to	003131)					OCT 2.7 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

LEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's	partnership, firm or corporation, if any:		
	Business & Industry Association of NH		
(Name of	partnership, firm or corporation)		
III. Name of Client	Business & Industry Association of NH	Date	10-25-17
to lobbying, including fe	t of all fees received from the client identified above es for services such as public advocacy, governmen toring legislation, and related legal work. The gr	t relations, o	or public relations service
a) Total of all fees receiv	a) \$	4,063	
	ved this calendar year, prior to this reporting period e total of all prior monthly reports for this calendar y		8,126
c) Total of all fees receive (Add lines a and b)	c) \$	12,189	
d) Indicate the amount o yet been paid	f any such fees that are due, but have not	d) \$	
fees. Separate reports are the lobbyist(s)/firm that Expenses are to be reporting the reporting periodicidual expenses where lunch where the cost was being lobbied, purchase of (c) an itemized statement any purpose not covered ceremonial object to be restaurant expenses for a	rtnerships, firms, or corporations are required to re- re to be filed for expenditures made relative to each are unrelated to any one client a separate report red in one of three categories of expenses: (a) th od for salaries, benefits, support staff, and office e- re the expenditure was of \$25.00 or less (for examp \$25.00 or less, purchase of a pen with a value of le of a ceremonial object given to a person being lobbi of each individual expenditure made during this rep- by (a) (for example: purchase of a meal with val given to the subject of lobbying with a value great a legislative reception). Expenses for honorariums orted on separate addendums and should not be repor-	client and if may be file e aggregate xpenses; (b) de: meals put ess than \$10 ed with a valorting periodue of greate er than \$25, e, expense ro	expenditures are made by d for the lobbyist(s)/firm total of all expenses paid the aggregate total of a prehased during a business that is given to the persolue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of but not greater than \$50 eimbursement, or political
support staff, and office e	ses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying.	a) \$7	7,851
in a), of \$25 or less.			
S 40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	xpenditures reported in detail in section VI.	2 (0	

86/ 10.25.17

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$7,851
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$15,702
f) Total of all expenses year to date	f) \$23,553
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
ALAMINI John	10-25-17
(Signature of lobbyist)	(Date)
Stefanie G. Lamb	
(Print Name of lobbyist)	